Debtor 1	Yvonne M Fields	;		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	19-53130-mlo			
if known)				☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	182,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	67,666.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	249,666.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	125,704.33
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	4,100.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	116,380.85
	Your total liabilities	\$	246,185.18
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,748.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,633.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nersonal	I family or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2 8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______2,744.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,100.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,100.00

btor 1	Yvonne M Fields	- Name		
btor 2	First Name Middle	e Name Last Name		
ouse, if filing)	First Name Middle	e Name Last Name		
ited States Bank	ruptcy Court for the: EASTERN	DISTRICT OF MICHIGAN		
se number 19	9-53130-mlo			☐ Check if this is a amended filling
	m 106A/B A/B: Property			12/15
☐ No. Go to	Part 2.			
	re is the property?	What is the property? Check all that apply		
8259 Berksl		What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
8259 Berksl	hire Dr.	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of any secure	ed claims on Schedule D:
8259 Berksl Street address, if a	hire Dr. available, or other description MI 48198-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	Current value of the entire property? \$182,000.00 Describe the nature of the	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte	or 1 Y	vonne M Fields		Case number (if known)	19-53130-mlo
3. Ca	rs, vans,	trucks, tractors, sport utility v	rehicles, motorcycles		
		, , , , , , , , , , , , , , , , , , , ,	•		
•	Yes				
		Cadillac		Do not deduct sec	ured claims or exemptions. Put
3.1	Make:	SRX	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model: Year:	2016	■ Debtor 1 only	Creditors who Ha	ve Claims Secured by Property.
		nate mileage: 78000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	cilino proporty i	pormon you on
				400.000	
			☐ Check if this is community property (see instructions)	\$20,000	2.00 \$20,000.00
			(see instructions)		
3.2	Mala	Ford	Who has an interest in the prepart Q O	Do not deduct sec	ured claims or exemptions. Put
3.2	Make: Model:	Taurus	Who has an interest in the property? Check one		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	1996	■ Debtor 1 only □ Debtor 2 only		, , ,
		nate mileage: 80000	Debtor 1 and Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
		formation:	☐ At least one of the debtors and another	,	
			_	¢4 000	00
			☐ Check if this is community property (see instructions)	\$1,800	9.00 \$1,800.00
			(555 1151 451.51.5)		
5 A c	dd the do	ollar value of the portion you o	wn for all of your entries from Part 2, includir	ng any entries for	\$04.000.00
.pa	ges you	have attached for Part 2. Write	e that number here	=>	\$21,800.00
Part 3	Descri	be Your Personal and Household	Items		
			nterest in any of the following items?		Current value of the
·			, c		portion you own?
					Do not deduct secured claims or exemptions.
		goods and furnishings			
_	<i>(ampies:</i> No	Major appliances, furniture, linen	is, china, kitchenware		
		scribe			
	. 00. 20	001100			
		Household fur	nishings		\$2,000.00
	ctronics				
E		Televisions and radios; audio, vi- including cell phones, cameras,	deo, stereo, and digital equipment; computers, p	orinters, scanners; music c	ollections; electronic devices
	No	including cell priories, cameras,	media piayers, games		
	Yes. De	scribe			
		(2) TVs			\$50.00
		s of value			
E		Antiques and figurines; paintings other collections, memorabilia, c	s, prints, or other artwork; books, pictures, or othe collectibles	er art objects; stamp, coin,	or baseball card collections;
	No	and denotions, mornorabilia, o			
		scribe			
Ott: -:-	I Carm 1	DE A /B	Cohodulo A/Di Droporti		

Official Form 106A/B Schedule A/B: Property page 2
Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com
Best Case Bankruptcy

De	ebtor 1	Yvonne M F	ields		Case number (if known)	19-53130-mlo
9.	Example No	ent for sports a es: Sports, photo musical instr Describe	ographic, exercise, and other	hobby equipment; bicycles, pool table	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
	■ No		es, shotguns, ammunition, and	d related equipment		
11.	Clothes Examp		lothes, furs, leather coats, de	signer wear, shoes, accessories		
	□ No	Describe	, ,			
			Wardrobe			\$1,500.00
12.	□ No			gement rings, wedding rings, heirloor	n jewelry, watches, gems, ç	gold, silver \$100.00
			Jewelry			\$100.00
13.	Exampa □ No -	m animals les: Dogs, cats, Describe	birds, horses			
			(1) dog			\$100.00
14.	□ No	ner personal ar		not already list, including any heal	th aids you did not list	
			Hearing aides			\$50.00
15				Part 3, including any entries for pag	es you have attached	\$3,800.00
		cribe Your Finar n or have any	ncial Assets legal or equitable interest in	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions
	■ No		have in your wallet, in your h	ome, in a safe deposit box, and on ha	nd when you file your petiti	claims or exemptions.

Del	btor 1	Yvonne M	I Fields			Case numb	er (if known) 19-5313	80-mlo
			g, savings, c	or other financial accounts with			brokerage houses, an	d other similar
	_		_		Institution name:			
				Checking &				
			17.1.		UofM CU			\$0.00
_				cly traded stocks ent accounts with brokera	age firms, money marke	t accounts		
				Institution or issuer nam	e:			
[joint vo ⊐ No	enture	information	about them	ed and unincorporated			C, partnership, and
			Na	me of entity:		% of owne	rsnip:	
			Fie	eld of Memories (pho	tobooth)	100	%	\$1.00
21. •	Retiren Examp	nent or pensoles: Interests	ion account in IRA, ERI	nts SA, Keogh, 401(k), 403(k	o), thrift savings account	s, or other pension or pr	rofit-sharing plans	
			Турс	or account.				
_	Your sl		used deposi	ments its you have made so tha dlords, prepaid rent, publ				ers
[☐ Yes.				Institution name or in	dividual:		
	Annuit i ■ No	ies (A contrad	ct for a perio	odic payment of money to	you, either for life or for	a number of years)		
	☐ Yes		Issuer nam	ne and description.				
: I	26 U.S.0 ■ No	C. §§ 530(b)(1), 529A(b),	in an account in a qualif and 529(b)(1). name and description. Se		-		
L	☐ Yes			name and description. St	Sparatory me the records	or any interests. IT U.S		

Deptor 1	Yvonne M Fields		Case number (if known)	19-5313U-MIO
25. Trust : ■ No	s, equitable or future interests i	n property (other than anythir	ng listed in line 1), and rights or powers exe	rcisable for your benefit
	s. Give specific information about	them		
— 163	s. Oive specific information about	uieii		
			-	
26. Paten	nts, copyrights, trademarks, trad	le secrets, and other intellect	ual property	
	mples: Internet domain names, wel			
■ No				
☐ Yes	s. Give specific information about	them		
7 Licen	ses, franchises, and other gene	ral intangibles		
			on holdings, liquor licenses, professional license	es .
■ No	,	, ,		
	s. Give specific information about	them		
— 103	s. Give specific information about			
Money o	r property owed to you?			Current value of the
				portion you own? Do not deduct secured
				claims or exemptions.
				oranno or oxomparono.
28. Tax r e	efunds owed to you			
■ No				
☐ Yes	s. Give specific information about t	hem, including whether you alre	eady filed the returns and the tax years	
	·		•	
Exan □ No -	ly support nples: Past due or lump sum alimo s. Give specific information	ny, spousal support, child supp	port, maintenance, divorce settlement, property	settlement
		Arrears		***
			Child Support	\$42,000.00
	r amounts someone owes you nples: Unpaid wages, disability ins benefits; unpaid loans you		nefits, sick pay, vacation pay, workers' compen	sation, Social Security
■ No				
☐ Yes	s. Give specific information			
	ests in insurance policies	rance: health savings account	(HSA); credit, homeowner's, or renter's insuran	00
	inples. Health, disability, of file filst	marice, riealtri savirigs account	(113A), credit, florileowner's, or renter's insuran	ce
■ No				
⊔ Yes	s. Name the insurance company of		Panafisian :	Currendon on material
	Company	name:	Beneficiary:	Surrender or refund value:
				value.
				-
32. Any i	nterest in property that is due y	ou from someone who has di	ed	
		st, expect proceeds from a life in	nsurance policy, or are currently entitled to rece	ive property because
	eone has died.			
No				

Schedule A/B: Property page 5 Official Form 106A/B

Debtor 1	Yvonne M Field	ds	Case number (if known)	19-53130-mlo
☐ Yes.	Give specific inform	nation		
	·			
			ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue	
	Describe each clain	n		
34. Other 6	contingent and unli	iquidated	claims of every nature, including counterclaims of the debtor and rights t	o set off claims
☐ Yes.	Describe each clain	n		
■ No	nancial assets you o		ready list	
☐ Yes.	Give specific inform	nation		
			entries from Part 4, including any entries for pages you have attached	\$42,001.00
Part 5: De	escribe Any Business-	Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.	
37 Do you	own or have any legal	l or equitab	ole interest in any business-related property?	
-	o to Part 6.			
☐ Yes. 0	Go to line 38.			
				Current value of the
				portion you own? Do not deduct secured claims or exemptions.
38. Accou	nts receivable or co	ommissio	ns you already earned	
□ No				
	Describe			
	equipment, furnish ples: Business-relate		supplies ers, software, modems, printers, copiers, fax machines, rugs, telephones, desks	, chairs, electronic devices
□ No				
☐ Yes.	Describe			
40. Machir	nery, fixtures, equip	oment, su	pplies you use in business, and tools of your trade	
□ No				
☐ Yes.	Describe			
41. Invent	tory			
□ No				
	Describe			

Debtor 1	Yvonne M Fields	5	Case number (if known)	19-53130-mlo
42. Interes	ts in partnerships o	r joint ventures		
□ No □ Yes.	Give specific informa	tion about them Name of entity:	% of ownership:	
			%	
43. Custon □ No.	ner lists, mailing list	s, or other compilations		
☐ Do you	ır lists include persona	ally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No ☐ Yes. Describe			
44. Any bu	siness-related prop	erty you did not already list		
□ No □ Yes.	Give specific informa	tion		
		l of your entries from Part 5, including any entries ber here		
			L	
		Commercial Fishing-Related Property You Own or Have a est in farmland, list it in Part 1.	nn Interest In.	
■ No.	Go to Part 7.	gal or equitable interest in any farm- or commerci	al fishing-related property?	
☐ Yes.	Go to line 47.			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
47. Farm a <i>Examp</i>	nimals bles: Livestock, poultr	y, farm-raised fish		
□ No □ Yes				
48. Crops -	either growing or l	narvested		
□ No □ Yes.	Give specific informa	tion		
49. Farm a	nd fishing equipme	nt, implements, machinery, fixtures, and tools of t	rade	
		, , , , , , , , , , , , , , , , , , , ,		
□ No □ Yes				

Deb	tor 1 Yvonne M F	ields		Case number (if known)	19-53130-mlo
50. F	arm and fishing sup	plies, chemicals, and feed			
] No] Yes				
51. /	Any farm- and comme	ercial fishing-related property you did not	already list		
	I No I Yes. Give specific inf	ormation			
52.		of all of your entries from Part 6, includin number here			
Part	7: Describe All Pr	operty You Own or Have an Interest in That You	ı Did Not List Above		
		operty of any kind you did not already list tets, country club membership ormation One pose photo booth, laptop, lights		er, ink, backdrops,	\$65.00
54.		of all of your entries from Part 7. Write the	at number here		\$65.00
55	Part 1: Total real est	ate, line 2			\$182,000.00
	Part 2: Total vehicle		\$21,800.00		ψ102,000.00
		al and household items, line 15	\$3,800.00		
	Part 4: Total financia	·	\$42,001.00		
59.	Part 5: Total busines	ss-related property, line 45	\$0.00		
60.	Part 6: Total farm- a	nd fishing-related property, line 52	\$0.00		
		roperty not listed, line 54 +	\$65.00		
62.	Total personal prope	erty. Add lines 56 through 61	\$67,666.00	Copy personal property to	stal \$67,666.00
63.	Total of all property	on Schedule A/B. Add line 55 + line 62			\$249,666.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Yvonne M Fields			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT C	OF MICHIGAN	
Case number	19-53130-mlo			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

ecific laws that allow exemption
ch. Comp. Laws § 0.5451(1)(m)
(
ch. Comp. Laws § 0.5451(1)(g)
5.5-10 T(T)(g)
ch. Comp. Laws § 0.5451(1)(c)
ch. Comp. Laws § 0.5451(1)(c)
ch. Comp. Laws § 0.5451(1)(a)(iii)
····

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Jewelry Line from <i>Schedule A/B</i> : 12.1	\$100.00		\$100.00	Mich. Comp. Laws § 600.5451(1)(c)
			100% of fair market value, up to any applicable statutory limit	
(1) dog Line from Schedule A/B: 13.1	\$100.00		\$100.00	Mich. Comp. Laws § 600.5451(1)(f)
			100% of fair market value, up to any applicable statutory limit	
Hearing aides Line from Schedule A/B: 14.1	\$50.00		100%	Mich. Comp. Laws § 600.5451(1)(a)(v)
Ellie Holli Gallodale 772. T 111			100% of fair market value, up to any applicable statutory limit	ουσιο το τ(τημητή
Child Support: Arrears Line from Schedule A/B: 29.1	\$42,000.00		\$42,000.00	Mich. Comp. Laws §
Zino nom osnossio 702. Zon			100% of fair market value, up to any applicable statutory limit	
One pose photo booth, laptop, rinters, pens, paper, ink, backdrops,	\$65.00		\$65.00	Mich. Comp. Laws § 600.5451(1)(c)
lights Line from Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit	000.0.10.1(1)(0)
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every № No Yes. Did you acquire the property covered No	3 years after that for ca	ises fi	,	,
□ No □ Yes				

Fill in this information to identify an					
Fill in this information to identify yo	ur case:				
Debtor 1 Yvonne M Field					
First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	EASTERN DISTRICT OF MICHIC	CAN			
Officed States Bankruptcy Court for the	EASTERN DISTRICT OF WILCHIR	<u>JAN</u>			
Case number 19-53130-mlo					
(if known)					if this is an
				ameno	led filing
Official Form 106D					
	· What Have Claims C	الممسيمما	h. Duanant		4044
Schedule D: Creditors	s who have Claims S	<u>ecurea</u>	by Propert	<u>y</u>	12/15
Be as complete and accurate as possible.					
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to	this form. On t	the top of any addition	nal pages, write your na	me and case
1. Do any creditors have claims secured b	y your property?				
☐ No. Check this box and submit	this form to the court with your other so	chedules. You	have nothing else t	o report on this form.	
Yes. Fill in all of the information	•				
	below.				
Part 1: List All Secured Claims			Column A	Column B	Column C
List all secured claims. If a creditor has for each claim. If more than one creditor ha			Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabet			Do not deduct the	that supports this	portion
2.1 Ally Financial	Describe the property that secures the	e claim:	value of collateral. \$23,204.33	claim \$20,000.00	If any \$3,204.33
Creditor's Name	2016 Cadillac SRX 78000 mile		Ψ20,204.00	Ψ20,000.00	Ψ0,204.00
	2010 Guamao Grix 10000 mmo				
	As of the date you file, the claim is: Ch	a a le all that			
PO Box 9001951	apply.	ieck all that			
Louisville, KY 40290-1951	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_	☐ An agreement you made (such as mo	ortagae or secui	-ed		
Debtor 1 only	car loan)	nigage or secur	eu		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	ariio 3 licrij			
☐ Check if this claim relates to a		Auto Ioan			
community debt					
Date debt was incurred 2018	Last 4 digits of account numbe	er 2508			
	_				
2.2 City of Ypsilanti	Describe the property that secures the	e claim:	\$500.00	\$182,000.00	\$0.00
Creditor's Name	8259 Berkshire Dr. Ypsilanti, I	МІ			
	48198 Washtenaw County				
4 C. Huran Street	As of the date you file, the claim is: Ch	neck all that			
1 S. Huron Street Ypsilanti, MI 48197	apply.				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
riamber, exect, exy, exace a zip eeas	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mo	ortgage or secur	red		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	•			
☐ Check if this claim relates to a	Other (including a right to offset)	Vater bill			
community debt					
Date debt was incurred 2019	Last 4 digits of account numbe	er 2508			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Yvonne M Fields		Case number (if known)	19-53130-mlo	
First Name Middle N	lame Last Name			
2.3 PNC Mortgage	Describe the property that secures the claim	s \$102,000.00	\$182,000.00	\$0.00
Creditor's Name	8259 Berkshire Dr. Ypsilanti, MI 48198 Washtenaw County			
P.O. Box 533510 Atlanta, GA 30353-3510	As of the date you file, the claim is: Check all the apply. Contingent	hat		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage car loan)	or secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortga	age		
Date debt was incurred	Last 4 digits of account number 2	508		
Add the dollar value of your entries in 0	Column A on this page. Write that number here:	\$125,704	.33	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$125,704	.33	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this information	n to identify your c	case:								
De	btor 1 Y	onne M Fields									
	Firs	st Name	Middle N	Name	Last Nam	Э					
	btor 2 ouse if, filing) First	st Name	Middle N	Name	Last Nam						
	, 0,										
Un	ited States Bankrup	tcy Court for the:	EASTERN	DISTRICT OF MI	CHIGAN						
Ca	se number 19-53	130-mlo									
(if kı	nown)									if this is an	
									amend	ed filing	
Of	ficial Form 10	6E/F									
	hedule E/F:		ho Have	Unsecured	d Claim	S				12/15)
Sch left.	edule G: Executory C edule D: Creditors W Attach the Continuat e and case number (i	no Have Claims Secuion Page to this page	ured by Prope	rty. If more space is	s needed, co	py the Part	you need, fill it out, i	number the o	entries ir	the boxes	
Pa	rt 1: List All of Y	our PRIORITY Un	secured Cla	ims							
1.	Do any creditors have	ve priority unsecured	d claims agair	st you?							
	☐ No. Go to Part 2.										
	Yes.										
2.	possible, list the claim	laim it is. If a claim ha	s both priority are according to	and nonpriority amou the creditor's name.	ınts, list that of If you have n	laim here a	t the creditor separate nd show both priority a priority unsecured cla	nd nonpriorit	y amount	s. As much	as
	(For an explanation o	f each type of claim, s	ee the instructi	ons for this form in the	he instruction	booklet.)					
							Total claim	Priority amount		Nonpriorit amount	у
2.1	IRS		L	ast 4 digits of acco	unt number	2508	\$4,000.00		00.00		\$0.00
	Priority Creditor's PO Box 7340	6		When was the debt i	incurred?	2017					
		ı , PA 19101-7346 ity State Zip Code									
				s of the date you fi	le, the claim	is: Check a	II that apply				
	Who incurred the o	•	_	s of the date you fi	le, the claim	is: Check a	Il that apply				
	Who incurred the o	•	[Contingent	le, the claim	is: Check a	ll that apply				
	Debtor 1 only	•]	☐ Contingent☐ Unliquidated☐	le, the claim	is: Check a	ll that apply				
	■ Debtor 1 only □ Debtor 2 only	lebt? Check one.]]]	Contingent			ll that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and De	lebt? Check one.]] T	Contingent Unliquidated Disputed	nsecured cla		ll that apply				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and De □ At least one of the	lebt? Check one. btor 2 only de debtors and anothe]] T ,	Contingent Unliquidated Disputed Open of PRIORITY u Domestic support	nsecured cla	ıim:					
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and De □ At least one of the	lebt? Check one. btor 2 only he debtors and anothe him is for a commun	[C T r [sity debt	Contingent Unliquidated Disputed ype of PRIORITY u	nsecured cla obligations other debts y	iim: rou owe the	government				
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and De □ At least one of the □ Check if this classes	lebt? Check one. btor 2 only he debtors and anothe him is for a commun	[C T r Lity debt ■	Contingent Unliquidated Disputed Uppe of PRIORITY u Domestic support Taxes and certain Claims for death c Other. Specify	nsecured cla obligations other debts y	nim: You owe the ury while yo	government				

State of Michigan	Last 4 digits of account number	2508	\$100.00	\$100	0.00	\$0.
Priority Creditor's Name Department of Treasury Collection Division	When was the debt incurred?	2018				Ψ0.
P.O. Box 77437						
Detroit, MI 48277-0437 Number Street City State Zip Code	As of the date you file, the claim	is: Check a	Il that apply			
Vho incurred the debt? Check one.	Contingent	io. Oncok a	п тасарыу			
Debtor 1 only	☐ Unliquidated					
☐ Debtor 2 only	☐ Disputed					
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:				
☐ At least one of the debtors and another	☐ Domestic support obligations					
_	■ Taxes and certain other debts y	ou owo tho	government			
☐ Check if this claim is for a community debt sthe claim subject to offset?	Claims for death or personal inj					
No	Other. Specify	ary willo yo	a word intoxicated			
Yes	income tax	<u> </u>				
No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	vho holds e at type of cl	aim it is. Do not list cl	aims already inclu	uded in Part	1. If more
No. You have nothing to report in this part. Submit Yes. ist all of your nonpriority unsecured claims in the needured claim, list the creditor separately for each claim one creditor holds a particular claim, list the other	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	vho holds e at type of cl	aim it is. Do not list cl	aims already inclu	uded in Part Continuation	1. If more Page of
No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the issecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	vho holds e at type of cl nan three no	laim it is. Do not list cl onpriority unsecured c	aims already inclu	uded in Part	1. If more Page of
No. You have nothing to report in this part. Submit Yes. It all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c n one creditor holds a particular claim, list the other at 2. *Comcast	this form to the court with your other sealphabetical order of the creditor laim. For each claim listed, identify wh	vho holds e at type of cl nan three no	laim it is. Do not list cl onpriority unsecured c	aims already inclu	uded in Part Continuation	1. If more Page of
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Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other rt 2. *Comcast Nonpriority Creditor's Name P.O. Box 3007 Attn: Bankruptcy Southeastern, PA 19398-3006 Number Street City State Zip Code	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify where creditors in Part 3.If you have more to be also be	who holds of all type of clean three not record with the end of th	laim it is. Do not list cl onpriority unsecured c	aims already inclu	uded in Part Continuation	1. If more Page of
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Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each can one creditor holds a particular claim, list the other t. *Comcast Nonpriority Creditor's Name P.O. Box 3007 Attn: Bankruptcy Southeastern, PA 19398-3006 Number Street City State Zip Code Who incurred the debt? Check one.	this form to the court with your other set alphabetical order of the creditor relaim. For each claim listed, identify where creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you hav	who holds of all type of clean three not record with the end of th	laim it is. Do not list cl onpriority unsecured c	aims already inclu	uded in Part Continuation	1. If more Page of
*Comcast Non Box 3007 Attn: Bankruptcy Southeastern, PA 19398-3006 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify where creditors in Part 3.If you have more to the Last 4 digits of account numb. When was the debt incurred? As of the date you file, the cla	who holds eat type of claran three not record with the record rec	laim it is. Do not list clonpriority unsecured conpriority unsecured conpriority unsecured conpriority unsecured conpriority unsecured conprises the control of the control	aims already inclu	uded in Part Continuation	1. If more Page of
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No. You have nothing to report in this part. Submit Yes. st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other at 2. *Comcast Nonpriority Creditor's Name P.O. Box 3007 Attn: Bankruptcy Southeastern, PA 19398-3006 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify where creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you have more to the creditors and the creditors in Part 4.If you have more to the creditors in	who holds of at type of clanar three not record with the end of th	laim it is. Do not list clonpriority unsecured o	aims already incli laims fill out the (uded in Part Continuation	1. If more Page of
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Nonpriority Creditor's Name P.O. Box 3007 Attn: Bankruptcy Southeastern, PA 19398-3006 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	this form to the court with your other set alphabetical order of the creditor value. For each claim listed, identify where creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you have more to the creditors and the creditors in Part 4.If you have more to the creditors in	who holds a at type of clans three not record with the end of the	laim it is. Do not list clonpriority unsecured of	aims already included in a laims fill out the Control of the Contr	uded in Part Continuation	1. If more Page of

Yvonne M Fields	Case	number (if known) 19-53130-ml	<u>, </u>
Avant, LLC	Last 4 digits of account number 164	5	\$2,394
Nonpriority Creditor's Name PO Box 9183380 Chicago II 60601	When was the debt incurred? 201	9	
Chicago, IL 60691 Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	n:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation a report as priority claims	agreement or divorce that you did not	
No	Debts to pension or profit-sharing plans	s, and other similar debts	
Yes	Other. Specify misc		
Care Credit	Last 4 digits of account number 019	4	\$42
Nonpriority Creditor's Name PO Box 965030	When was the debt incurred? 201	9	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply	
Who incurred the debt? Check one.	,		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	1:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation a report as priority claims	agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing plans	s, and other similar debts	
Yes	Other. Specify Dog expenses		
Commenity/Gardner White	Last 4 digits of account number 788	7	\$1,10
Nonpriority Creditor's Name PO Box 183003	When was the debt incurred? 201	9	
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply	
Who incurred the debt? Check one.	-	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	. ☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	n:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a separation a	agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	a and ather similar delete	
■ No	Debts to pension or profit-sharing plans		
Yes	■ Other. Specify living room furn	iture	

1 Yvonne M Fields		Case number (if known) 19-53130-m	lo
Credit One	Last 4 digits of account number	1949	\$1,728.81
Nonpriority Creditor's Name P.O. Box 60500 City Of Industry, CA 91716-0500	When was the debt incurred?	2019	
Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community debt	☐ Student loans		
Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify misc		
Credit One	Last 4 digits of account number	2866	\$431.18
Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred?	2019	
City Of Industry, CA 91716-0500 Number Street City State Zip Code	— As of the data you file the claim is	Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is	з: Спеск ал тлат арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify misc		
Elastic	Last 4 digits of account number	2046	\$1,133.00
Nonpriority Creditor's Name	_		V 1,100100
Republic Bank & Trust PO Box 950276	When was the debt incurred?	2019	
Louisville, KY 40295 Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	, a c, a c a a c y c a , a c c a	oneen all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	v plane, and other similar dabte	
No	Debts to pension or profit-sharing	g pians, and other similar debts	
Yes	Other. Specify misc		

Yvonne M Fields		,	
First Premeire Bank	Last 4 digits of account number	8518	\$710.5
Nonpriority Creditor's Name P.O. Box 5529 Sioux Falls, SD 57117	When was the debt incurred?	2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify misc		
Kohls	Last 4 digits of account number	2508	\$2,400.0
Nonpriority Creditor's Name PO Box 2983	When was the debt incurred?	2019	
Milwaukee, WI 53210-2983 Number Street City State Zip Code	As of the date you file, the claim	e. Chack all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	s. Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	<u> </u>		
_	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	☐ Student loans		
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	iration agreement of divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify misc		
Merrick Bank	Last 4 digits of account number	9456	\$849.6
Nonpriority Creditor's Name	_		·
P.O. Box 9201	When was the debt incurred?	2019	
Old Bethpage, NY 11804 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	3	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify misc		

1 Yvonne M Fields		Case number (if known) 19-53130-mlo	
Nelnet	Last 4 digits of account number	5662	\$100,000.
Nonpriority Creditor's Name 3015 S. Parker #400	When was the debt incurred?	2016	
Aurora, CO 80014 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Student Lo	ans	
Progressive	Last 4 digits of account number	2508	\$1,000
Nonpriority Creditor's Name			41,000
P.O. Box 7247-0114	When was the debt incurred?	2019	
Philadelphia, PA 19170-0001	As of the data way file the plains	to OL I Hill I	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify insurance		
Synchrony Bank/Value City	Last 4 digits of account number	2508	\$949
Nonpriority Creditor's Name PO Box 965030	When was the debt incurred?	2019	· · ·
Orlando, FL 32896 Number Street City State Zip Code		ion Charles II that are he	
Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск аш tnat apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharir	= :	
☐ Yes	■ Other. Specify bedroom fu	ırniture	

Debtor	1 Yvor	nne M	Fields		Case n	umber (if known)	19-53130-m	0
4.1	UofM (Credit	Union	Last 4 digits of account number	er 2508	}		\$2,977.81
	PO Bo	x 785	•	When was the debt incurred?	2019)		
	Number	Street C	MI 48107 City State Zip Code he debt? Check one.	As of the date you file, the clai	m is: Chec	k all that apply		
	■ Debto	or 1 only	1	☐ Contingent				
	☐ Debto			☐ Unliquidated				
			l Debtor 2 only	☐ Disputed				
			of the debtors and another	Type of NONPRIORITY unsecu	red claim:			
	_			☐ Student loans				
	debt		s claim is for a community pject to offset?	☐ Obligations arising out of a sereport as priority claims	eparation aç	greement or divorce	that you did not	
	■ No	uiiii oui	goot to onlock.	Debts to pension or profit-sha	arina nlane	and other similar de	ahte	
	■ No □ Yes			Other. Specify misc	anng plans,	and other similar de	:013	
Part 3:				ebt That You Already Listed				
is tryi have	ing to colle	ect from	n you for a debt you owe to s	about your bankruptcy, for a debt that comeone else, list the original creditor lat you listed in Parts 1 or 2, list the ac or submit this page.	r in Parts 1	or 2, then list the	collection agency	here. Similarly, if you
	and Addres		•	On which entry in Part 1 or Part 2 did y		•		
	ergent C Box 9004		urcing	Line 4.1 of (Check one):	_	Creditors with Priori	-	
_	on, WA 9				Part 2:	Creditors with Nonp	riority Unsecured C	laims
	,			Last 4 digits of account number				
	and Addres			On which entry in Part 1 or Part 2 did y	ou list the o	original creditor?		
		partm	ent of Attorney	Line 2.2 of (Check one):	Part 1:	Creditors with Priori	ty Unsecured Claim	ns
Cadill 3030	nue and lac Plac W. Gran	e, Sui d Blv	ection Division te 10-200 d.		☐ Part 2:	Creditors with Nonp	riority Unsecured C	laims
Detro	it, MI 48	3202		Last 4 digits of account number				
Name a	and Addres	ss		On which entry in Part 1 or Part 2 did y	ou list the o	original creditor?		
	torney			Line 2.1 of (Check one):	Part 1:	Creditors with Priori	ty Unsecured Claim	ns
•	Division	•	ita 2200		Part 2:	Creditors with Nonp	riority Unsecured C	laims
	it, MI 48		ite 2300	Last 4 digits of account number				
				Last 4 digits of account number				
Part 4:	Add t	the An	nounts for Each Type of U	Insecured Claim				
6. Total	the amou	nts of	certain types of unsecured cl	aims. This information is for statistica	al reporting	purposes only. 28	U.S.C. §159. Add	the amounts for each
	of unsecu							
							Claim	
Total		6a.	Domestic support obligation	ns	6a.	\$	0.00	
claims from Pa	art 1	6b.	Taxes and certain other deb	ots you owe the government	6b.	\$	4,100.00	
		6c.		Il injury while you were intoxicated	6c.	\$	0.00	
		6d.	-	nsecured claims. Write that amount here		\$	0.00	
		6e.	Total Priority. Add lines 6a th	orough 6d.	6e.	\$	4,100.00	
							Ol-i	
		6f.	Student loans		6f.	Total	Claim 0.00	
Total claims from Pa	art 2	6g.	Obligations arising out of a	separation agreement or divorce that			0.00	
		3	vou did not report as priorit		6g.	\$	0.00	

Debtor 1 Yvonne M Fields

Case number (if known) 19-53130-mlo

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

Scale number (if known) 19-53130-mlo

6h. \$ 0.00

6i. \$ 116,380.85

6j.

116,380.85

6j.

Total Nonpriority. Add lines 6f through 6i.

Fill in this inform	mation to identify your	case:		
Debtor 1	Yvonne M Fields			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
_	19-53130-mlo			
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the you have the your street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Fill in thi	s information to identify you	ır case:			
Debtor 1	Yvonne M Field	s			
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the	EASTERN DISTRICT OF	MICHIGAN		
Officed St	ates bankruptcy court for the	LASTERN DISTRICT OF	WICHIOAN		
Case nun	nber 19-53130-mlo				☐ Check if this is an amended filing
	al Form 106H				
<u>Sche</u>	dule H: Your Co	debtors			12/15
people are fill it out, your nam	e filing together, both are ed and number the entries in the e and case number (if know	ually responsible for supply be boxes on the left. Attach the	ing correct informati he Additional Page to	on. If more space is not this page. On the top	ite as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
	, you muse unit couldness (you a.og a jo oaco, ac	The mot entire operate		
■ No					
☐ Ye	es				
		ou lived in a community prop a, Nevada, New Mexico, Puer			states and territories include
=	0.4.10				
`	o. Go to line 3.	ouse, or legal equivalent live w	vith you at the time?		
— 16	s. Dia your spouse, ronnier sp	ouse, or legal equivalent live w	nui you at the time!		
	□No				
	☐ Yes.				
	In which community st	ate or territory did you live?		Fill in the name ar	nd current address of that person.
	City	State	Zip Code		
in lin Form	e 2 again as a codebtor only	if that person is a guaranto	r or cosigner. Make s	ure you have listed th	g with you. List the person shown le creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	2
0.1	Name			_ ☐ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street			-	
	City	State	ZIP Code		
				Double division in	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
	Number Street			=	_
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com 19-53130-mlo Doc 12 Filed 09/20/19 Entered 09/20/19 16:40:55 Page 24 of 36

Fill	in this information to	o identify your ca	ise:							
Del	otor 1	Yvonne M Fi	elds							
	otor 2 buse, if filing)									
Uni	ted States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF MICHIGAN						
Cas	se number 19-	53130-mlo				Chec	ck if this is	:		
(If kr	nown)					l —	An amende	•		
									g postpetition Illowing date:	
0	fficial Form	<u> 1061</u>				Ī	MM / DD/ Y	YYYY		
S	chedule I: `	Your Inco	ome							12/15
atta	ch a separate shee	et to this form. (e Employment	r spouse is not filing wi On the top of any addition							
١.	information.	oyment		Debtor 1			Debtor 2	2 or non-fil	ing spouse	
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed			☐ Empl	•		
			, ,	☐ Not employed			☐ Not e	mployed		
	employers.		Occupation	Environmental Sp	ecialist	<u> </u>				
	Include part-time, self-employed wo		Employer's name	KCO Management	<u>t</u>					
	Occupation may in or homemaker, if		Employer's address	14716 Allen St. Taylor, MI 48180						
			How long employed the	nere? 1 month			_			
Par	t 2: Give Det	tails About Mon	thly Income							
	mate monthly incouse unless you are s		te you file this form. If y	you have nothing to repo	ort for an	y line, write	e \$0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing e space, attach a se		re than one employer, co	ombine the information fo	or all em	ployers for	that perso	on on the lir	es below. If	you need
						For De	btor 1		otor 2 or ng spouse	
2.			y, and commissions (be alculate what the month)		2.	\$2	2,600.00	\$	N/A	
3.	Estimate and list	t monthly overti	me pay.		3. +	\$	0.00	+\$	N/A	
1	Calculate gross	Income Add lin	o 2 1 lino 2		4	¢ 26	00.00	•	NI/A	

Deb	tor 1	Yvonne M Fields		Ca	se number (if known)	19-53	3130-m	ilo	
					or Dobtor 1	Гот	Dobtor	2 0"	
				r	or Debtor 1		Debtor -filing s		
	Cop	y line 4 here	4.	\$	2,600.00	\$		N/A	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	302.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	- _
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$		N/A	_
	5e.	Insurance	5e.		0.00	. \$		N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	_
	5g.	Union dues	5g.		0.00	. \$		N/A	_
	5h.	Other deductions. Specify:	_ 5h.	+ \$	0.00	. + \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	302.00	. \$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,298.00	\$		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.		0.00	\$		N/A	_
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	0 -	•		Φ.			
	0 4	settlement, and property settlement.	8c.		0.00	. \$_		N/A	_
	8d.	Unemployment compensation	8d.		0.00	. \$_		N/A	_
	8e. 8f.	Social Security	8e.	\$	0.00	\$		N/A	_
	OI.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	– 8g.		0.00	- \$		N/A	_
	8h.	Other monthly income. Specify: Rent from son	8h.		300.00			N/A	_
	011.	substitute teaching		\$	350.00	· \$		N/A	_
		photobooth	_	\$	800.00	·		N/A	_
		photosocci.	_	_		· —			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,450.00	\$		N/A	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	.	3,748.00 + \$		N/A	= \$ _	3,748.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	deper				Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies					12.	\$	3,748.00
							ι	Combi	
10	Da :	value avenue on increase or decrease within the year often year file this forms	2					month	ly income
13.	■ Do 3	/ou expect an increase or decrease within the year after you file this form' No.	ſ						
		Yes. Explain:							
								_	

Fill i	n this informa	ation to identify yo	our case:			1		
Debt		Yvonne M Fi					k if this is: An amended filing	
Debt							A supplement shov	ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	EASTE	RN DISTRICT OF MICHIG	SAN	_	MM / DD / YYYY	
	e number 19	9-53130-mlo						
		orm 106J						
		J: Your l						12/15
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Part		ribe Your House	hold					
1.	Is this a joi							
	■ No. Go to	= .		ata haysahaldO				
		es Debtor 2 live i	n a separ	ate nousenoid?				
			t file Offic	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2			_	_, _, , _, _,				
2.	-	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son		32	■ Yes
								□ No
								☐ Yes ☐ No
								☐ No ☐ Yes
								□ No
								☐ Yes
3.		penses include		No				00
		of people other the dyour dependent	nan 👝	Yes				
		nate Your Ongoi						
exp		a date after the b		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
(Off	icial Form 10	061.)					Your expe	enses
4.		or home owners		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		•		upkeep expenses		4c. \$		45.00
		owner's associat				4d. \$		0.00
5.	Additional	mortgage payme	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses 19-53130-mlo Doc 12 Filed 09/20/19 Entered 09/20/19 16:40:55 Page 27 of 36

ebtor 1 Y	vonne M Fields	Case num	ber (if known)	19-53130-mlo
Utilities	S:			
6a. E	lectricity, heat, natural gas	6a.	\$	140.00
6b. W	Vater, sewer, garbage collection	6b.	\$	65.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	120.00
6d. C	Other. Specify:	6d.	\$	0.00
	nd housekeeping supplies	7.		200.00
	are and children's education costs	8.	\$	0.00
	g, laundry, and dry cleaning	9.	\$	20.00
	al care products and services	10.		65.00
	I and dental expenses	11.	· -	147.00
	ortation. Include gas, maintenance, bus or train fare.		Ψ	147.00
-	include car payments.	12.	\$	201.00
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ble contributions and religious donations	14.	\$	0.00
. Insuran	•		<u> </u>	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	ife insurance	15a.	\$	0.00
15b. H	lealth insurance	15b.	\$	0.00
15c. V	'ehicle insurance	15c.	•	150.00
	Other insurance. Specify:	15d.		0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		*	0.00
Specify:	, , ,	16.	\$	0.00
	nent or lease payments:		·	0.00
	Car payments for Vehicle 1	17a.	\$	430.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	·	0.00
	ayments of alimony, maintenance, and support that you did not report		Ψ	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106)		\$	0.00
. Other p	payments you make to support others who do not live with you.	-,-	\$	0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or on So	chedule I: Yo	ur Income.	
	fortgages on other property	20a.		0.00
20b. R	Real estate taxes	20b.	\$	0.00
20c. P	roperty, homeowner's, or renter's insurance	20c.	\$	0.00
	faintenance, repair, and upkeep expenses	20d.	\$	0.00
	Iomeowner's association or condominium dues	20e.	·	0.00
. Other:		21.	·	50.00
	Opeony. ret		-Ψ	50.00
	ite your monthly expenses			
22a. Ad	d lines 4 through 21.		\$	1,633.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	· · · · · · · · · · · · · · · · · · ·
22c. Ad	d line 22a and 22b. The result is your monthly expenses.		\$	1,633.00
				1,000.00
	te your monthly net income.		_	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,748.00
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$	1,633.00
	subtract your monthly expenses from your monthly income.	00	œ.	2 445 00
Т	he result is your monthly net income.	23c.	\$	2,115.00
For exammodificat	expect an increase or decrease in your expenses within the year after nple, do you expect to finish paying for your car loan within the year or do you expect y tion to the terms of your mortgage?			ease or decrease because
■ No. □ Yes.	[-			
	Explain here:			

Official Form 106J Schedule J: Your Expenses 19-53130-mlo Doc 12 Filed 09/20/19 Entered 09/20/19 16:40:55 Page 28 of 36

	tion to identify your	case:		
Debtor 1	Yvonne M Fields			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
Case number 19-	-53130-mlo			
(if known)				☐ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below										
Dio	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?										
	No										
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)									
that	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.										
Х	/s/ Yvonne M Fields Yvonne M Fields	Х	Signature of Debtor 2								
	Signature of Debtor 1		0								
	Date September 13, 2019		Date								

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fil	l in this inforn	nation to identify you	r case:			
De	btor 1	Yvonne M Fields	3			
	h4 0	First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
		19-53130-mlo				
(if k	nown)				-	heck if this is an mended filing
	fficial Fo					
			Affairs for Individ			4/19
info	ormation. If m	ore space is needed,	attach a separate sheet to		equally responsible for supp additional pages, write you	
nur	nber (if know	n). Answer every ques	stion.			
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.					ity property state or territory	
stat	tes and territori	ies include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
	No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?
	□ No					
	_	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	ebtor 1 Yv	onne M F	ields		Case	e number (if known) 19-5313	30-mlo	
				Debtor 1		Debtor 2		
				Sources of income Check all that apply. Gross income (before deductions exclusions)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	or last calen anuary 1 to		31, 2018)	■ Wages, commissions, bonuses, tips	\$3,500.00	☐ Wages, commissions, bonuses, tips		
				☐ Operating a business		☐ Operating a business		
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$38,088.00	☐ Wages, commissions, bonuses, tips		
				☐ Operating a business		☐ Operating a business		
	List each s	•	the gross inc	se and you have income that yource separa	_	•		
				Dahtan 4		Dahtan 0		
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Describe below.	Gross income (before deductions and exclusions)	
	or last calen anuary 1 to		31, 2018)	UIA	\$7,100.00			
_								
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6.	Are either ☐ No.	Neither D	ebtor 1 nor	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	umer debts. Consumer debts	s are defined in 11 U.S.C. § 1	101(8) as "incurred by an	
		During the No.	90 days bef Go to line	ore you filed for bankruptcy, di 7.	id you pay any creditor a total	l of \$6,825* or more?		
		□ Yes	paid that c	each creditor to whom you paireditor. Do not include paymer	nts for domestic support oblig	. ,	•	
		* Subject		e payments to an attorney for the ton 4/01/22 and every 3 year		or after the date of adjustme	nt.	
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		of \$600 or more?		
		□ _{No.}	Go to line	7.				
		■ Yes	include pa	each creditor to whom you pai yments for domestic support o r this bankruptcy case.	id a total of \$600 or more and bligations, such as child supp	I the total amount you paid the total amount you paid the port and alimony. Also, do no	nat creditor. Do not of include payments to an	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

19-53130-mlo

Official Form 107

Debtor 1

Yvonne M Fields

Deb	otor 1 Yvonne M Fields		C	Case number (if known)	19-53130-	mlo			
Par	t 5: List Certain Gifts and Contributio	ns							
13.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift.	ruptcy, (did you give any gifts with a total val	ue of more than \$60	0 per person	?			
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$6 per person	00	Describe the gifts	Dates the g	s you gave ifts	Value			
	Person to Whom You Gave the Gift and Address:	d							
14.	Within 2 years before you filed for bank ■ No	ruptcy, (did you give any gifts or contribution	s with a total value	of more than	\$600 to any charity?			
	☐ Yes. Fill in the details for each gift or	contribut	ion.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates	s you ibuted	Value			
Par	<u> </u>	,							
rai	List Certain Losses								
15.	Within 1 year before you filed for bankrior gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anything be	cause of the	ft, fire, other disaster,			
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the log the amount that insurance has paid. L nce claims on line 33 of Schedule A/B:	ist pending loss	of your	Value of property lost			
D-	t 7: List Certain Payments or Transfe			, ,					
	□ No ■ Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address	Vall	Description and value of any property transferred		payment Insfer was	Amount of payment			
	Person Who Made the Payment, if Not Frego & Associates - The Bankrup		attorney fees	9/3/2	019	\$100.00			
	Law 23843 Joy Road Dearborn Heights, MI 48127	,	,			V			
	Greenpath Credit Solutions 38505 Country Club Drive, Ste. 120 Farmington, MI 48331)	Bankruptcy Credit Counseling	9/12/	2019	\$50.00			
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer that	editors o	or to make payments to your creditors		fer any prope	rty to anyone who			
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any proper transferred	•	payment Insfer was	Amount of payment			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.										
	No										
	☐ Yes. Fill in the details.										
	Person Who Received Transfer Address	Description and value of property transferred		Describe any property or payments received or debts paid in exchange		Date transfer was made					
	Person's relationship to you			P							
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-profited No		ny property to a s	self-settled	trust or similar device	of which you are a					
	☐ Yes. Fill in the details.										
	Name of trust	Description and v	Description and value of the property transferred								
Par	made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units										
Ιa	List of Certain Financial Accounts, ins	truments, sale beposi	i boxes, and Sto	rage offics							
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage										
	houses, pension funds, cooperatives, assoc No	iations, and other finai	ncial institutions	·	ŕ	, ,					
	Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account account number instrument		c r	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)	ber, Street, City,			Do you still have it?					
22.	Have you stored property in a storage unit or	r place other than your	home within 1 y	ear before	you filed for bankrupto	cy?					
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Control f	for Someone Fise									
23.			ude any property	y you borro	wed from, are storing f	or, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe th	e property	Value					
Par	rt 10: Give Details About Environmental Info	rmation									
Ear	the purpose of Port 10, the following definition										

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Debtor 1 Yvonne M Fields Case number (if known) 19-53130-mlo

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	nazardous material, poliutant, contaminant, or similar term.									
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.										
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No									
	☐ Yes. F	ill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it		Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of s Address (ite Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)		Environme know it	ental law, if you	Date of notice			
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No									
	Yes. Fill in the details.									
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case		case	Status of the case			
Part 11: Give Details About Your Business or Connections to Any Business										
27.	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or equity securities of a corporation									
	□ No. None of the above applies. Go to Part 12.									
	Yes. Check all that apply above and fill in the details below for each business.									
	Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business Name of accountant or bookkeeper		Employer Identification number Do not include Social Security number or ITIN.					
					Dates business existed					
	Field of Memories 8259 Berkshire Dr. Ypsilanti, MI 48198		photo booth		EIN:	822959294				
			2017		From-To					

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debt	or 1 Yvonne M Fields	C	ase number (if known)	19-53130-mlo
i	Nithin 2 years before you filed for bankrup nstitutions, creditors, or other parties. ■ No □ Yes. Fill in the details below.	ccy, did you give a financial statement to a	anyone about your b	ousiness? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part	12: Sign Below			
are trewith a 18 U.S	e read the answers on this <i>Statement of Fin</i> ue and correct. I understand that making a a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571. Yonne M Fields nne M Fields	false statement, concealing property, or	obtaining money or	
Sign	ature of Debtor 1			
Date	September 13, 2019	Date		
Did ye ■ No		ent of Financial Affairs for Individuals Fili	ng for Bankruptcy (0	Official Form 107)?
■ No	ou pay or agree to pay someone who is no s. Name of Person . Attach the Bankru			al Form 119).
		,, = 001a1 au011,		